## PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number

Effective January 1, 2003

10603252

| Enocate dandary 1, 2000                        |  |   |  |                               |                              |                  |             |                | 060                    | 52. | 14                  |                        |
|--|--|---|--|-------------------------------|------------------------------|------------------|-------------|----------------|------------------------|-----|---------------------|------------------------|
| CLAIMS AS                                      |  |   | Golumn                                 |                               | (Column 2)                   |                  | SMALL ENTIT |                | NTITY                  | OR  | OTHER<br>SMALL      |                        |
| TOTAL CLAIMS                                   |  |   | 21                                     |                               | X                            |                  | R/          | TE             | FEE                    | ]   | RATE                | FEE                    |
| FOR  |  |   | NUMBER FILED                           |                               | NUMBER EXTRA                 |                  | BAS         | C FEE          | 375.00                 | OR  | BASIC FEE           | 750.00                 |
| TOTAL CHARGEABLE CLAIMS                        |  |   | 3/ minus 20=                           |                               | * []                         |                  | X           | 9=             |                        | OR  | X\$18=              | 198                    |
| INDEPENDENT CLAIMS                             |  |   | minus 3 =                              |                               | * Ø                          |                  | X           | 12=            |                        | OR  | X84=                |                        |
| ML   | ILTIPLE DEPEN  | DENT CLAIM P                              | RESENT                                 |                               |                              |                  | +140=       |                |                        | OR  | +280=               |                        |
| * If   | the difference   | in column 1 is                            | less than zero, enter "0" in column 2  |                               |                              |                  | TO          | TAL            |                        | OR  | TOTAL               | 948                    |
|  | C  | LAIMS AS A<br>(Column 1)                  | MENDED - PART II (Column 2) (Column 3) |                               |                              |                  | SM          | SMALL ENTITY   |                        |     | OTHER<br>SMALL      |                        |
| AMENDMENT A                                    |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  | HIGH<br>NUM<br>PREVIO<br>PAID | BER ·                        | PRESENT<br>EXTRA | RA          | ΛΤΕ ″          | ADDI-<br>TIONAL<br>FEE |     | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus                                  | **                            |                              | =                | X           | 9=             |                        | OR  | X\$18=              |                        |
|  | Independent  | *   | Minus                                  | ***                           | E CL AINA                    | =                | X           | 12=            |                        | OR  | X84=                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |   |  |                               |                              |                  |             | 40=            |                        | OR  | +280=               |                        |
|  |  |   |  |                               |                              |                  |             | OTAL<br>I. FEE |                        | OR  | TOTAL<br>ADDIT. FEE |                        |
| (Column 1) (Column 2) (Column 3)               |  |   |  |                               |                              |                  |             |                |                        |     |                     |                        |
| AMENDMENT B                                    | en e   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  | HIGH<br>NUM<br>PREVIO<br>PAID | IBER                         | PRESENT<br>EXTRA | RA          | TE             | ADDI-<br>TIONAL<br>FEE |     | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus                                  | **                            |                              | =                | XS          | 9=             |                        | OR  | X\$18=              |                        |
|  | Independent  | *   | Minus                                  | ***                           | T CL AIM                     | =                | X           | 2=             |                        | OR  | X84=                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |   |  |                               |                              |                  |             | 40=            |                        | OR  | +280=               |                        |
|  |  |   |  |                               |                              |                  |             | OTAL<br>r. fee |                        | OR  | TOTAL<br>ADDIT. FEE |                        |
| (Column 1) (Column 2) (Column 3)               |  |   |  |                               |                              |                  |             |                |                        |     |                     |                        |
| AMENDMENT C                                    |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  | PREVI                         | HEST<br>MBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA | R/          | \TE            | ADDI-<br>TIONAL<br>FEE |     | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus                                  | **                            |                              | =                | X           | 9=             |                        | OR  | X\$18=              |                        |
| AME  | Independent  | *   | Minus                                  | ***                           | <b>T.O.</b> (13)             | =                | X4          | 2=             |                        | OR  | X84=                |                        |
|  | FIRST PRESENTATION OF M  |   | ULTIPLE DEPENDENT                      |                               | T CLAIM                      | CLAIM            |             |                |                        |     | +280=               |                        |
|  |  | <u> </u>                                  | 40=<br>OTAL                            |                               | OR                           |                  |             |                |                        |     |                     |                        |
| **   | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |  |                               |                              |                  |             |                |                        |     |                     |                        |